

09875335

CLAIMS AS FILED - PART I

SMALL ENTITY TYPE ☐

OTHER THAN SMALL ENTITY ☐

| RATE | FEE |
|-----------|--------|
| BASIC FEE | 375.00 |
| X\$9= | |
| X42= | |
| +140= | |
| TOTAL | |

| RATE | FEE |
|-----------|--------|
| BASIC FEE | 770.00 |
| X\$18= | |
| X86= | |
| +280= | |
| TOTAL | |

SMALL ENTITY OR

OTHER THAN SMALL ENTITY

| RATE | ADDITIONAL FEE |
|-----------------|----------------|
| X\$9= | |
| X42= | |
| +140= | |
| TOTAL ADDIT FEE | |

| RATE | ADDITIONAL FEE |
|-----------------|----------------|
| X\$18= | |
| X86= | |
| +280= | |
| TOTAL ADDIT FEE | |

| RATE | ADDITIONAL FEE |
|-----------------|----------------|
| X\$9= | |
| X42= | |
| +140= | |
| TOTAL ADDIT FEE | |

| RATE | ADDITIONAL FEE |
|-----------------|----------------|
| X\$18= | |
| X86= | |
| +280= | |
| TOTAL ADDIT FEE | |

| RATE | ADDITIONAL FEE |
|-----------------|----------------|
| X\$9= | |
| X42= | |
| +140= | |
| TOTAL ADDIT FEE | |

| RATE | ADDITIONAL FEE |
|-----------------|----------------|
| X\$18= | |
| X86= | |
| +280= | |
| TOTAL ADDIT FEE | |

| | (Column 1) | (Column 2) |
|----------------------------------|--------------|--------------------------|
| TOTAL CLAIMS | | |
| FOI | NUMBER FILED | NUMBER EXITS |
| TOTAL CHARGEABLE CLAIMS | NUMBER 20 | |
| INDEPENDENT CLAIMS | NUMBER 3 | |
| MULTIPLE DEPENDENT CLAIM PRESENT | | <input type="checkbox"/> |

* If the difference in column 1 is less than zero, enter "0" in column 2

CLAIMS AS AMENDED - PART II

| | (Column 1) | (Column 2) | (Column 3) |
|--|----------------------------------|------------------------------------|--------------------------|
| AMENDMENT A | CLAIMS REMAINING AFTER AMENDMENT | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA |
| Total | 19 | 20 | |
| Independent | 3 | 3 | |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | <input type="checkbox"/> |

| | (Column 1) | (Column 2) | (Column 3) |
|--|----------------------------------|------------------------------------|--------------------------|
| AMENDMENT B | CLAIMS REMAINING AFTER AMENDMENT | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA |
| Total | | | |
| Independent | | | |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | <input type="checkbox"/> |

| | (Column 1) | (Column 2) | (Column 3) |
|--|----------------------------------|------------------------------------|--------------------------|
| AMENDMENT C | CLAIMS REMAINING AFTER AMENDMENT | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA |
| Total | | | |
| Independent | | | |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | <input type="checkbox"/> |

- * If the entry in column 1 is less than the entry in column 2, write "0" in column 3
 - * If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."
 - * If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."
- The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.